(Purpose: To clarify provisions relating to first dollar coverage for preventive services for women)

On page 17, strike lines 9 through 24, and insert the following: "ance coverage shall, at a minimum provide coverage for and shall not impose any cost sharing requirements for—

"(1) evidence-based items or services that have in effect a rating of 'A' or 'B' in the current recommendations of the United States Preventive Services Task Force;

"(2) immunizations that have in effect a recommendation from the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention with respect to the individual involved; and

"(3) with respect to infants, children, and adolescents, evidence-informed preventive care and screenings provided for in the comprehensive guidelines supported by the Health Resources and Services Administration

"(4) with respect to women, such additional preventive care and screenings not described in paragraph (1) as provided for in comprehensive guidelines supported by the Health Resources and Services Administration for purposes of this paragraph."

"Nothing in this subsection shall be construed to prohibit a plan or issuer from providing coverage for services in addition to those recommended by United States Preventive Services Task Force or to deny coverage for services that are not recommended by such Task Force."

Ms. MIKULSKI. Mr. President, before I go into the contents of my amendment, I thank the Senator from Wyoming for his unfailing courtesy to allow me to proceed to offer my amendment. I have worked with the Senator from Wyoming on the Health, Education, Labor and Pensions Committee, and have often valued his sound counsel and steady hand as we have moved complex legislation. His considerable experience as an accountant and his commitment to the stewardship of Federal funds have often added to the consideration of legislation. As we move forward on both debating and refining the health care reform bill before us, I look forward to working with him. Again, I thank him for his courtesy.

I also want to acknowledge the Democratic leader and wish to support him for bringing something called the "merged" bill to the floor, which took the best elements of both the Finance Committee and the HELP Committee and brought them forth.

I believe the overriding bill before us is an excellent bill. No. 1, it expands universal access to health care that will now cover over 90 percent more Americans. It will end the punitive practices of insurance companies, particularly in the area of gender, age discrimination, and preexisting conditions. It also stabilizes and makes Medicare secure and, at the same time, it begins to bend the cost curve by following innovative practices related to quality control and prevention.

I think the overriding bill is an excellent one. I congratulate the manager of the bill on the floor, the Senator from Montana, Mr. BAUCUS, chairman of the Finance Committee, for the excellent

work his committee did, for bringing in a great bill that establishes new ideas, such as medical homes, emphasizing primary care and prevention, and at the same time accomplishing the objectives I have mentioned.

However, as I reviewed the bill, I felt we could do more to be able to enhance and improve women's health care. That is what my amendment does. The essential aspect of my amendment is that it guarantees women access to lifesaving preventive services and screenings.

This amendment eliminates one of the major barriers to accessing care in the area of cost and preventive services. It does it by getting rid of, or minimizing, high copays and high deductibles that are often overwhelming hurdles for women to access screening programs. We know that screening is important and early detection is important because it saves lives. But it also saves money. It does it by reducing the top diseases that are killing women today, or certainly impairing their lives.

Today, according to the CDC, the top killers of women are cancer—breast cancer, cervical cancer, colorectal cancer, ovarian cancer. Also upfront and high on the list is lung cancer which, if identified early, can be treated with less invasive procedures and with lower costs. Another top killer of women is heart and vascular disease. And then there are the silent killers that often go undetected, such as diabetes, which can result in terrible consequences, such as the loss of an eye, the loss of a limb, or the loss of a kidney.

We now have screenings that are proven to detect these diseases early. Guaranteed access to these screenings, as I said, will save money and lives.

If we look at where women are today, we find women often forgo those critical preventive screenings because they simply cannot afford it, or their insurance company won't pay for it unless it is mandated by State law. Many women right now don't have insurance at all—seventeen million women in the United States of America are uninsured—or when they are insured, they have to pay large out-of-pocket expenses.

Three in five women have significant problems paying their medical bills. Women are more likely than men to neglect care or treatment because of cost. Fourteen percent of women report they delay or go without needed health care. Women of childbearing age incur 68 percent more out-of-pocket health care costs than men, simply because of the maternity aspect.

Women are often faced with the punitive practices of insurance companies. No. 1 is gender discrimination. Women often pay more and get less. For many insurance companies, simply being a woman is a preexisting condition. Let me repeat that. For many insurance companies, simply being a woman is a preexisting condition. We pay more because of our gender, anywhere from 2

percent to over 100 percent. A 25-year-old woman is charged up to 45 percent more than a 25-year-old male in the same identified health status. A 40-year-old woman is charged anywhere from 2 percent to 140 percent more than a 40-year-old man with the same health status for the same insurance policy.

What does my amendment do? It guarantees access to those critical preventive services for women to combat their No. 1 killers. We will provide these services at minimal cost.

The overall cost of my amendment has been scored by CBO. It says the cost is \$1 billion. The majority leader, the Democratic leader, has provided opportunities to meet this cost. This amendment eliminates this big barrier of copayments and deductibles.

Let's talk about the benefit package. This benefit package is based on HRSA recommendations. It is based also on the recommendations of CDC. If this amendment passes, women will have access to the same preventive health services as the women in Congress have. If this passes, again, the women of America will have access to the same preventive services that we women in Congress have.

What does that mean? It means a mammogram, if your doctor says you need it; screening for cervical cancer, if your doctor says you need it; that check on diabetes, if your doctor is worried about you; and along with the symptoms related to menopause, there are other things, such as a loss of weight; and they may want to know at this juncture if you have diabetes. If you know that at 40, you are less likely to need kidney dialysis when you are 60.

The pending bill doesn't cover key preventive services, such as annual screenings for women of all ages to focus on our unique health needs. We know that for many people—for example, there are 15 million people in America with diabetes, and half are women. Often pregnant women with diabetes don't get the proper prenatal care. Heart disease is one of the top two leading causes of death in women—cancer and heart disease. Every year, over 267,000 women die from heart attacks. Women are generally unaware of their heart risks.

My amendment would, again, ensure heart disease screening for women. Remember that famous study that said "take an aspirin a day to keep a heart attack away." It was done on 10,000 male medical residents, and not one woman was included. Thanks to a bipartisan effort, Bernadine Healy, NIH, and the women of the Senate, supported by the good guys of the Senate, were able to get that screening for women, get that evaluation. We know we manifest things differently than guys do. Now we are on our way to detection—if you can afford to have a doctor and if you can afford to have the screening.

My amendment also guarantees screenings for breast cancer—yes, for